AMENDED

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Fill in this information to identify your case:				
Debtor 1	Joseph Lombardi			
-	First Name	Middle Name	Last Name	
Debtor 2	Lorie A Lombardi			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: District of New Jersey				
Case number	19-25502 (If known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>440,908.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>67,392.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>508,300.00</u>
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$ <u>621,521.04</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 11,595.20
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 76,434.89
Your total liabilities	\$ <u>709,551.13</u>
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>11,392.07</u>
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ 10,527.07

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Debtor 1

Joseph Lombardi First Name Middle Name

Last Name

19-25502 Case number (if known)

Pa	Answer These Questions for Administrative and Statistical Records	1	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this formation of the form.	orm to the court with your other	r schedules.
7.	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	oses. 28 U.S.C. § 159.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	come from Official	\$15,451.21
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$11,595.20	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
	9d. Student loans. (Copy line 6f.)	\$45,337.75	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	
	9g Total Add lines 9a through 9f	\$ 56,932.95	

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Fill in this information to identify your case:				
Debtor 1	Joseph Lombard	i		
Debtor 2	First Name Lorie A Lombardi	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: _ District of New Jersey				
Case number	19-25502		•	
(If known)				

<u>Ch</u> eck	if	this	is:	

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	Employed Not employed
	Include part-time, seasonal, or self-employed work.	Occupation	Pressman	Sleep Technologist
	Occupation may include student or homemaker, if it applies.	Оссирации	Daily News LP	Saint Barnabas Medical Center
		Employer's name		
		Employer's address		
			Number Street	Number Street
			,	,
		•	City State ZIP Code	City State ZIP Code
		How long employed there	? 27 years	7 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 6,930.13 \$ 5,047.08

3. +s 0.00 + s 74.11

\$ 6,930.13 \$ 5,121.19

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	s 6,930.13	\$ 5,121.19	
5. List all payroll deductions:	7 4.	Ψ	Ψ	
. ,	Fo	_{\$} 1,232.15	_{\$} 916.45	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans	5a.	\$ 1,232.13 \$ 0.00	\$ 524.55	
·	5b.	22.08	0.00	
5c. Voluntary contributions for retirement plans	5c.	207.09	Ω2.20	
5d. Required repayments of retirement fund loans	5d.	Ψ	42.00	
5e. Insurance	5e.	0.00	0.00	
5f. Domestic support obligations	5f.	160 50	0.00	
5g. Union dues	5g.	Ψ	Ψ	
5h. Other deductions. Specify: 401k Loan, 401K Loan 2	5h.	+ \$ 334.29	+ \$ 137.21	
Supplemental Life, Omnia	-	\$ 45.75	\$ <u>122.28</u>	
Press Welfare Contr. Child/Spouse & Opt Life		\$ 331.66	\$ 36.67	
Child Life: Opt Life & Spousal Life		\$	\$18.49	
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	. 6.	\$_2,425.52	_{\$1,892.19}	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 4,504.61	\$ 3,229.01	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business,				
profession, or farm Attach a statement for each property and business showing gross				
receipts, ordinary and necessary business expenses, and the total		s 1,100.00	s 0.00	
monthly net income.	8a.	s 0.00	\$ 0.00	
8b. Interest and dividends	8b.	\$0.00_	\$0.00_	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ient			
Include alimony, spousal support, child support, maintenance, divorce		\$ 0.00	s 0.00	
settlement, and property settlement.	8c.	0.00	0.00	
8d. Unemployment compensation	8d.	\$ 0.00 \$ 0.00	\$	
8e. Social Security	8e.	\$0.00_	\$0.00_	
8f. Other government assistance that you regularly receive				
Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental	ince			
Nutrition Assistance Program) or housing subsidies.		\$ 0.00	g 0.00	
Specify:	_ 8f.	Ψ	Ψ	
8g. Pension or retirement income	8g.	\$0.00	\$0.00	
8h. Other monthly income. Specify: See continuation page attached	_ 8h.	+ \$ 1,002.17	+ \$ 1,556.28	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	s 2,102.17	\$ 1,556.28	1
3. Add all other medile. Add lines on 1 ob 1 oc 1 od 1 oc 1 of 1 og 1 off.	٥.	Φ′	Ψ	
10. Calculate monthly income. Add line 7 + line 9.		s 6,606.78	4 \$ 4,785.29	= \$ 11,392.07
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ	Ψ	
11. State all other regular contributions to the expenses that you list in Sche	edule J	<u>.</u>		
Include contributions from an unmarried partner, members of your household,	, your de	ependents, your roo	ommates, and other	
friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are	o not av	vailable to hav expe	neae listad in Schodula I	
	5 HOL av	raliable to pay expe	11.	+ \$ 0.00
Specify:				Ψ
12. Add the amount in the last column of line 10 to the amount in line 11. The			•	_{\$} 11,392.07
Write that amount on the Summary of Your Assets and Liabilities and Certain	JIANSII	vai iiiiviiiialivii, ii li	арупсэ 12.	Ψ————— Combined
40 B				monthly income
 Do you expect an increase or decrease within the year after you file this No. Yes Mrs I ombardi's pension loan will end in A 			additional #00/	- لطمالمين مط النبيد
☐ No. Yes, Mrs. Lombardi's pension loan will end in A ☐ Yes. Explain: to the fund the debtor's plan.	Augus	si ∠u∠u, thus an	audilional \$93/month	wiii be avallable
. 30. Exposite to the fully the debter 3 plan.				

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Debtor 1

irst Name Middle Name Last Name

Case number (if known)_

Continuation Sheet for Official Form 106I

8h. Other Monthly Income:

Son's Contribution for Car payment \$476.00 (2014 Honda) (Debtor)

Son's Contribution for car payment \$526.17 (2013 Nissan) & (2008 Harley) (Debtor)

Son's Contribution for car payment \$566.28 (2011 Mazda) & (16 Harley) (Joint Debtor)

Wife's PT Job at Ocean Heart Inc. \$990.00 Average monthly income (Joint Debtor)

Official Form 106I Schedule I: Your Income

Fill in this information to identify your case:			
Debtor 1	Joseph Lombardi	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Lorie A Lombardi First Name	Middle Name	Last Name
United States Bankruptcy Court for the District of New Jersey Case number 19-25502			_
(If known)			_

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone wh	no is NOT an attorney to help you fill out bankruptcy forms?
✓ No Yes. Name of person	Attack Paulinintary Patition Propagation Paulining Paulining
Tes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I that they are true and correct.	have read the summary and schedules filed with this declaration and
✗ /s/ Joseph Lombardi	★ /s/ Lorie A Lombardi
Signature of Debtor 1	Signature of Debtor 2
Date 11/21/2019	_{Date} 11/21/2019
MM / DD / YYYY	MM / DD / YYYY